

	INDIANA DEPARTMENT OF CHILD SERVICES CHILD WELFARE POLICY	
	Chapter 4: Assessment	Effective Date: March 1, 2016
	Section 16: Medical Examinations, Psychological Testing, Drug Screens and Substance Abuse Evaluations	Version: 5

STATEMENTS OF PURPOSE

During an assessment, the Indiana Department of Child Services (DCS) may obtain medical examinations and/or psychological tests, drug screens, or other substance abuse evaluations on an **alleged child victim** and **any child who lives in the home** of an alleged child victim to determine the health and well-being of the child.

DCS will pursue a **medical examination** when one (1) or more of the following conditions exists:

1. The child has an injury that would cause a reasonable person to believe that medical attention is necessary;
2. The allegations include sexual abuse involving penetration and it is believed the information that will be gathered during the examination of the child will assist in making an assessment finding;
3. The child has been removed from a property that contains a contaminating controlled substance. See the [Indiana Drug Endangered Children \(DEC\) Response Protocol](#) for additional information; or
4. The child is under two (2) years of age and shaking or a head injury is alleged even if there are no visible injuries.

Note: A Pediatric Evaluation and Diagnostic Service (PEDS) referral is mandatory for all children less than six (6) years of age with allegations of suspected abuse or neglect involving the head or neck and all children less than three (3) years of age with allegations of suspected abuse or neglect resulting in fractures or burns or suspected fractures or burns. Although this policy states the age for mandatory PEDS referrals, all intake reports involving injury or suspected injury to the head or neck of any child, as well as, fractures and burns regardless of age will be identified in the case management system so local office staff may evaluate the need for a non-mandatory referral to the Program. The PEDS program is available 24 hours a day, seven (7) days a week.

DCS will ensure that all child victims who will be under the supervision of DCS receive a **Child and Adolescent Needs and Strengths (CANS) Assessment**. See policy, [5.19 Child and Adolescent Needs and Strengths \(CANS\) Assessment](#) for further guidance.

DCS will pursue **psychological testing (diagnostic and evaluation services)** when approved by the Clinical Services Specialist and one (1) or more of the following conditions exists:

1. The child's CANS Assessment indicates a need for a full mental health assessment. See policy, [5.19 Child and Adolescent Needs and Strengths \(CANS\) Assessment](#) for more information; or

2. The child exhibits behaviors that would cause a reasonable person to believe he or she is a danger to him or herself and/or others.

DCS will pursue a **drug screen and/or a substance abuse evaluation** of the child victim if one (1) or more of the following conditions exists:

1. The alleged child victim may have had access to illegal substances being used by the parent, guardian, custodian, or other adults in the home; or
2. The alleged child victim's behavior indicates he or she may have used or been exposed to illegal substances as a result of neglect or lack of supervision on the part of the parent, guardian, or custodian.

DCS may ask a parent, guardian, or custodian of an alleged child victim to **voluntarily** submit to a medical examination and/or psychological testing, drug screens, or other substance abuse evaluations if there is an indication based upon the behavior of the individual or the allegations involve Child Abuse and/or Neglect (CA/N) which may be due to:

1. Illegal substance use;
2. Alcohol abuse; or
3. Mental incompetence.

Note: If the parent, guardian, or custodian does not agree to voluntarily submit to medical examinations, psychological testing, drug screens, or other substance abuse evaluations, DCS may pursue a court order if such examinations, tests and evaluations are necessary to complete the assessment.

DCS may seek access to medical, mental health, or substance abuse records of the parent, guardian, or custodian as part of an [Preliminary Inquiry](#), if needed when a child is alleged to be a Child in Need of Services (CHINS). DCS may petition the juvenile court for an order to release the mental health records if the parent does not consent.

Code References

1. [IC 31-32-12: Mental or Physical Examinations](#)
2. [IC 31-33-8-7: Scope of investigation by department of child services; order for access to home, school, or other place, or for mental or physical examinations](#)
3. [IC 16-39-3-8: Child in need of services; petition for emergency hearing on request for records of parent, guardian, or custodian](#)

PROCEDURE

The Family Case Manager (FCM) will:

1. Secure written consent from the parent, guardian, or custodian;
2. Seek a court order, if consent is not given and the child is alleged to be a CHINS;

Note: In emergency situations it may not be possible to secure consent from the parent, guardian, or custodian or a court order.

3. Arrange for necessary medical examinations and/or approved psychological testing, drug screens or substance abuse evaluations;

Note: FCMs should consult with his or her FCM Supervisor and Clinical Services Specialist to determine the need for psychological testing (diagnostic and evaluation

services) as all psychological testing needs to be approved in advance by the Clinical Services Specialist.

4. Ensure a PEDS referral is made if warranted or required. See [Practice Guidance](#) for more information; and
5. Request written findings upon the examination and follow procedures in policy, [4.17 Accessing Child's Medical, Psychological and Substance Abuse Records](#) to obtain copies of the records.

PRACTICE GUIDANCE

Pediatric Evaluation and Diagnostic Service (PEDS) Referrals

It is **mandatory to complete a PEDS referral for all children less than six (6) years of age with an allegation of suspected abuse or neglect involving the head or neck** (eg. facial bruising, scratches and red " marks" on the face/neck; mouth injuries, eye injuries, head bleeds, skull fractures and a fracture or burn involving the head/neck) **and all children less than three (3) years of age with allegations of suspected abuse or neglect resulting in fractures or burns or suspected fractures or burns.** All intake reports with suspected allegations of suspected abuse or neglect involving the head or neck of a child, as well as, allegations of suspected abuse or neglect resulting in fractures and burns regardless of age will be identified in the case management system with a denotation of "PEDS allegation is included in this Report". Evaluations of all reports identified should include any information obtained from the child and/or family. FCMs should utilize critical thinking to evaluate and staff the situation with an FCM Supervisor to determine if a need exists to complete a non-mandatory PEDS referral for children of any age with injury or suspected injury to the head or neck or with fractures or burns or suspected fractures or burns. A referral should also be considered, if a child, regardless of age, is unable to provide an explanation for the injury or the explanation for the injury is not convincing and there is reason to believe there is a pattern of repeated abuse. The PEDS program referral may be found here: https://ota.medicine.iu.edu/ChildProtection_V2.

Waiting for Test/Evaluation Results

If the FCM has not received the results of a medical examination or psychological test, drug screen, or other substance abuse evaluation by the end of the assessment deadline, the FCM should proceed with making a finding. See policy, [4.22 Making an Assessment Finding](#) without the test/evaluation results unless the results will impact the finding one way or another.

FORMS AND TOOLS

1. [Indiana Drug Endangered Children \(DEC\) Response Protocol](#)
2. [Preliminary Inquiry](#)
3. PEDS Program Referral- Available at https://ota.medicine.iu.edu/ChildProtection_V2
4. [Consent to Release of Mental Health and Addiction Records \(SF 51128\)](#)

RELATED INFORMATION

Medical Exams for Alleged Sexual Abuse Victims

The extent and type of evaluation will be determined by a medical doctor. The doctor will likely consider such things as the length of time that has passed since the incident, the age of the child (in relation to the trauma of an invasive exam), etc.

Temporary Confinement of Child

Per [IC 31-32-12-2](#): The juvenile court may order that the child be temporarily confined for up to 14 days, excluding Saturdays, Sundays, and legal holidays, for the completion of mental or physical examinations of the child.